

1. CIR./DIST./ DIV. CODE EDNY	2. PERSON REPRESENTED JASON WILLIAMS	VOUCHER NUMBER	
3. MAG. DKT./DEF. NUMBER		4. DIST. DKT./DEF. NUMBER 11CR424(JG)	5. APPEALS DKT./DEF. NUMBER
7. IN CASE/MATTER OF (Case Name) USA V. WILLIAMS ET AL.		8. PAYMENT CATEGORY <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Petty Offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Other Appeal	9. TYPE PERSON REPRESENTED <input checked="" type="checkbox"/> Adult Defendant <input type="checkbox"/> Appellant <input type="checkbox"/> Juvenile Defendant <input type="checkbox"/> Appellee Other
		10. REPRESENTATION TYPE (See Instructions) CC	

11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) *If more than one offense, list (up to five) major offenses charged, according to severity of offense.*

18 U.S.C.922(g)

BROOKLYN OFFICE

CATEGORIES (Attach itemization of services with dates)		HOURS CLAIMED	TOTAL AMOUNT CLAIMED	MATH/TECH. ADJUSTED HOURS	MATH/TECH. ADJUSTED AMOUNT	ADDITIONAL REVIEW
In	a. Arraignment and/or Plea	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	b. Bail and Detention Hearings	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	c. Motion Hearings	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	d. Trial	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	e. Sentencing Hearings	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	f. Revocation Hearings	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	g. Appeals Court	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	h. Other (Specify on additional sheets)	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
(RATE PER HOUR = \$ [REDACTED])	TOTALS:	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Out of	a. Interviews and Conferences	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	b. Obtaining and reviewing records	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	c. Legal research and brief writing	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	d. Travel time	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	e. Investigative and other work (Specify on additional sheets)	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
(RATE PER HOUR = \$ [REDACTED])	TOTALS:	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
17.	Travel Expenses (lodging, parking, meals, mileage, etc.)	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
18.	Other Expenses (other than expert, transcripts, etc.)	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
GRAND TOTALS CLAIMED AND ADJUSTED:		[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE TO: _____			20. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION		21. CASE DISPOSITION	

22. CLAIM STATUS Final Payment Interim Payment Number _____ Supplemental Payment _____

Supplemental Payment

Have you previously applied to the court for compensation and/or reimbursement for this YES NO If yes, were you paid? YES NO
Other than from the Court, have you, or to your knowledge has anyone else, received payment (compensation or anything of value) from any other source in connection with this

Other than from the Court, have you, or to your knowledge has anyone else, received payment (compensation or anything of value) from any other source in connection with this representation? YES NO If yes, give details on additional sheets

I swear or affirm the truth or correctness of the above statements.

Signature of Attorney: _____ **Date:** _____

Signature of Attorney _____ Date _____

APPROVED FOR PAYMENT — GOVERNMENT USE ONLY

23. IN COURT COMP. 24. OUT OF COURT COMP. 25. TRAVEL EXPENSES 26. OTHER EXPENSES 27. TOTAL AMT. APPR./CERT.

For more information about the study, please contact Dr. Michael J. Hwang at (310) 206-6500 or via email at mhwang@ucla.edu.

28 SIGNATURE OF THE PRESIDING JUDICIAL OFFICER _____ DATE _____ 28a JUDGE/MAG. JUDGE CODE _____

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29. IN COURT COMP. **30. OUT OF COURT COMP.** **31. TRAVEL EXPENSES** **32. OTHER EXPENSES** **33. TOTAL AMT. APPROVED**

29. IN COURT COMP. 30. OUT OF COURT COMP. 31. TRAVEL EXPENSES 32. OTHER EXPENSES 33. TOTAL AMT. APPROVED

34. SIGNATURE OF CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE), P. _____ **DATE:** _____ **34. JUDGE CODE:** _____

34. SIGNATURE OF CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE) Payment approved
DATE 34a. JUDGE CODE